

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 1
FOR SE OF FORM 24/48

| | | |
|--|--|---|
| NAME OF COMMITTEE (In Full) The Voices of the American Federation of Government Employees | | FEC IDENTIFICATION NUMBER ▼ C C00512293 |
| Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | MM / DD / YYYY |

| | | |
|---|--------------------|--|
| Full Name (Last, First, Middle Initial) of Payee WORKING AMERICA | | Date MM / DD / YYYY 06 / 07 / 2012 |
| Mailing Address 815 16TH ST NW | | Amount 33334.00 |
| City WASHINGTON | State DC | Zip Code 20006 |
| Purpose of Expenditure Voter education in the state of NM | Category/Type | Transaction ID : SE.4185 |
| Name of Federal Candidate Supported or Opposed by Expenditure: MARTIN TREVOR HEINRICH | | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: _____ |
| Calendar Year-To-Date Per Election for Office Sought 33334.00 | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose |
| | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ |

| | | |
|---|--------------------|--|
| Full Name (Last, First, Middle Initial) of Payee WORKING AMERICA | | Date MM / DD / YYYY 06 / 07 / 2012 |
| Mailing Address 815 16TH ST NW | | Amount 33334.00 |
| City WASHINGTON | State DC | Zip Code 20006 |
| Purpose of Expenditure Voter education in the state of NM | Category/Type | Transaction ID : SE.4187 |
| Name of Federal Candidate Supported or Opposed by Expenditure: MARTIN TREVOR HEINRICH | | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: _____ |
| Calendar Year-To-Date Per Election for Office Sought 33334.00 | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose |
| | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____ |

| | |
|---|-----------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 66668.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures..... | 66668.00 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. John Gage

Signature

[Electronically Filed]

Date

MM / DD / YYYY
06 / 01 / 2012